

01/14/02

A/Reissue

Please type a plus sign inside this box

PTO/SB/50 (08-02)

Approved for use through 12/30/2000 OMB 0651-0032
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REISSUE PATENT APPLICATION TRANSMITTAL

Address to: Commissioner for Patents Box Reissue Washington, DC 20231	Attorney Docket No.	125.028USR1			
	First Named Inventor	Michael M. Walters, et al.			
	Original Patent Number	6,278,263			
	Original Patent Issue Date (Month/Day/Year)	08/21/01			
	Express Mail Label No.	EL823841819US			
APPLICATION FOR REISSUE OF: (check applicable box)					
<input checked="" type="checkbox"/> Utility Patent <input type="checkbox"/> Design Patent <input type="checkbox"/> Plant Patent					
APPLICATION ELEMENTS (37 CFR 1.173)					
1. <input type="checkbox"/> Fee Transmittal Form (PTO/SB/56) <small>(Submit an original, and a duplicate for fee processing)</small> 2. <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. 3. <input checked="" type="checkbox"/> Specification and Claims in double column copy of patent format (amended, if appropriate) 4. <input checked="" type="checkbox"/> Drawing(s) (proposed amendments, if appropriate) 5. <input checked="" type="checkbox"/> Reissue Oath/Declaration (original or copy) <small>(37 CFR § 1.175)(PTO/SB/51 or 52)</small> 6. Original U.S. Patent currently assigned? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <small>(If Yes, check applicable box(es))</small> <input type="checkbox"/> Written Consent of all Assignees (PTO/SB/53) <input checked="" type="checkbox"/> 37 CFR 3.73(b) Statement (PTO/SB/96) <input type="checkbox"/> Power of Attorney					
ACCOMPANYING APPLICATION PARTS 7. <input type="checkbox"/> Statement of status/support for all changes to the claims. See 37 CFR 1.173(c). 8. <input type="checkbox"/> Original U.S. Patent for surrender <input type="checkbox"/> Ribboned Original Patent Grant <input type="checkbox"/> Statement of Loss (PTO/SB/55) 9. <input type="checkbox"/> Foreign Priority Claim (35 U.S.C. 119) <small>(if applicable)</small> 10. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO- <input type="checkbox"/> Copies of IDS Citations 11. <input type="checkbox"/> English Translation of Reissue Oath/Declaration <small>(if applicable)</small> 12. <input checked="" type="checkbox"/> Preliminary Amendment 13. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <small>(Should be specifically itemized)</small> 14. Other:					
15. CORRESPONDENCE ADDRESS					
<input type="checkbox"/> Customer Number or Bar Code Label <input checked="" type="checkbox"/> 27073		or <input checked="" type="checkbox"/> Correspondence address below			
Name	Laura A. Ryan				
Address	Fogg, Slifer, Polglaze, Leffert & Jay, P.A. P.O. Box 581009				
City	Minneapolis	State	MN	Zip Code	55458-1009
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Name (Print/Type)	Laura A. Ryan	Registration No. (Attorney/Agent)			49,055
Signature	<i>Laura A. Ryan</i>			Date	January 11, 2002

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REISSUE APPLICATION FEE TRANSMITTAL FORM

Docket Number (optional)

125.028USR1

Claims as Filed – Part 1

Claims in Patent		Number Filed in Reissue Application	(3) Number Extra	Small Entity		Other than a Small Entity	
				Rate	Fee	Rate	Fee
(A) 18	Total Claims (37 CFR 1.16(j))	(B) 22	**** 2 = x \$	=		x \$ 18 =	36.00
(C) 3	Independent claims (37 CFR 1.16(j))	(D) 5	* 3 = x \$	=		x \$ 84 =	168.00
							\$ 740.00
						OR	\$ 944.00

Claims as Amended – Part 2

	(1) Claims Remaining After Amendment		(2) Highest No Previously Paid For	(3) Extra Claims Present	Small Entity		Other than a Small Entity	
					Rate	Fee	Rate	Fee
Total Claims (37 CFR 11.16(j))	***	MINUS	**	* =	x \$	=	x \$	=
Independent claims 37 CFR 1.16(j))	***	MINUS	*****	=	x \$	=	x \$	=
							OR	\$

* If the entry in (D) is less than the entry in (C), Write "0" in column 3.

** If the "Highest Number of Total Claims Previously Paid For" is less than 20, Write "20" in this space

*** After any cancellation of claims.

**** If "A" is greater than 20, use (B-A), if "A" is 20 or less, use (B-20).

***** "Highest Number of Independent Claims Previously Paid For" or Number of Independent Claims in Patent (C)

 Applicant claims small entity status See 37 CFR 1.27 Please charge Deposit Account No. _____ in the amount of \$ _____.
A duplicate copy of this sheet is enclosed The Commissioner is hereby authorized to charge any additional fees under 37 CFR 1.16 or 1.17 which may be required,
or credit any overpayment to Deposit Account No 501373
A duplicate copy of this sheet is enclosed. A check in the amount of \$ 944.00 to cover the filing/additional fee is enclosed Payment by credit card Form PTO-2038 is attached

January 11, 2002

Date

Signature of Applicant, Attorney, or Agent of Record

Laura A. Ryan / Reg. No. 49,055

Typed or printed name

**REISSUE APPLICATION: CONSENT OF ASSIGNEE;
STATEMENT OF NON-ASSIGNMENT**

Docket Number (Optional)

125.028USR1

This is part of the application for a reissue patent based on the original patent identified below.

Name of Patentee(s) Michael M. Walters, Charles E. Hawkes, and Robert H. Isham

Patent Number
6,278,263

Date Patent Issued
August 21, 2001

Title of Invention

MULTI-PHASE CONVERTER WITH BALANCED CURRENTS

1. Filed herein is a certificate under 37 CFR 3.73(b). (Form PTO/SB/96)

2. Ownership of the patent is in the inventor(s), and no assignment of the patent is in effect.

One of boxes 1 or 2 above must be checked. If multiple assignees, complete this form for each assignee. If box 2 is checked, skip the next entry and go directly to "Name of Assignee".

The written consent of all assignees and inventors owning an undivided interest in the original patent is included in this application for reissue.

Intersil Communications, Inc.
2401 Palm Bay Road NE
MS 53-209

The assignee(s) owning an undivided interest in said original patent is/are Palm Bay, Florida 32905,
and the assignee(s) consents to the accompanying application for reissue.

Name of assignee/inventor (if not assigned)

Signature

Date

1/10/02

Typed or printed name and the title of person
signing for assignee (if assigned)

Paul A. Bernkopf
Chief Intellectual Property Counsel & Corporate Assistant Secretary

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STATEMENT UNDER 37 CFR 3.73(b)Applicant/Patent Owner: Intersil Communications, Inc.Application No./Patent No.: 09/591,404 - 6,278,263 Filed/Issue Date: 06/12/00 - 08/21/01Entitled: MULTI-PHASE CONVERTER WITH BALANCED CURRENTS

Intersil Communications, Inc. a corporation,
 (Name of Assignee) (Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)

states that it is:

- the assignee of the entire right, title, and interest; or
- an assignee of an undivided part interest

in the patent application/patent identified above by virtue of either:

A. An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the Patent and Trademark Office at Reel _____, Frame _____, or for which a copy thereof is attached.

OR

B. A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as shown below:

1. From: Michael M. Walters, et al. To: Intersil Corporation
 The document was recorded in the Patent and Trademark Office at
 Reel 10889, Frame 0719, or for which a copy thereof is attached.
2. From: Intersil Corporation To: Intersil Communications, Inc.
 The document was recorded in the Patent and Trademark Office at
 Reel _____, Frame _____, or for which a copy thereof is attached.
3. From: _____ To: _____
 The document was recorded in the Patent and Trademark Office at
 Reel _____, Frame _____, or for which a copy thereof is attached.

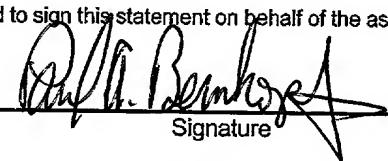
 Additional documents in the chain of title are listed on a supplemental sheet. Copies of assignments or other documents in the chain of title are attached.

[NOTE: A separate copy (i.e., the original assignment document or a true copy of the original document) must be submitted to Assignment Division in accordance with 37 CFR Part 3, if the assignment is to be recorded in the records of the PTO. See MPEP 302-302.8]

The undersigned (whose title is supplied below) is empowered to sign this statement on behalf of the assignee.

1/10/02

Date



Signature

Paul A. Bernkopf

Typed or printed name

Chief IP Counsel & Corp. Asst. Sec.

Title

State of Delaware
Office of the Secretary of State

PAGE 1

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT COPY OF THE RESTATED CERTIFICATE OF "INTERSIL CORPORATION", CHANGING ITS NAME FROM "INTERSIL CORPORATION" TO "INTERSIL COMMUNICATIONS, INC.", FILED IN THIS OFFICE ON THE TWENTY-FIFTH DAY OF MAY, A.D. 2001, AT 4:15 O'CLOCK P.M.

A FILED COPY OF THIS CERTIFICATE HAS BEEN FORWARDED TO THE NEW CASTLE COUNTY RECORDER OF DEEDS.

RECORDED BY COMPUTER
IN THE OFFICE OF THE
SECRETARY OF STATE
OF DELAWARE

3050122 8100

010253080



Harriet Smith Windsor
Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 1155634

DATE: 05-25-01